SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailplece, or on the front if space permits. 	A Signature X Illua VCLC
1. Article Addressed to:	If YES, enter delivery address below:
Mr. Jon W. Sanfilippo, Clerk United States District Court 362 United States Courthouse and Federal Building	
517 East Wisconsin Avenue Milwaukee, WI 53202	3. Service Type
_	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
08W130-1	4. Restricted Delivery? (Extra Fee)
2. Article Number 7007 0710 0003 4410 4350 (Transfer from service label)	
PS Form 3811, February 2004 Domestic Reti	urn Receipt 102595-02-M-1540

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